	1 -	N1 D-135UE F		` '	701-12			
MAILING INSTRUCTIONS: TH	is form should be used for transmitting	ng the ISSUE FEE.	Blocks 2 thro	ugh 6 should be completed	where appropriate. All	further correspondence		
by: (a) specifying a new corresp	t, the Patent, advance orders and no ondence address in Block 3 below; o reverse for Certificate of Mailing,	r.(b) providing the P						
	n Act of 1995, no persons are requir		collection of i	nformation unless it display	s a valid OMB control	number.		
Burden Hour Statement: This	form is estimated to take 0.2 hours	to complete. Time	will vary					
depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office,				INVENTOR'S NAME	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) INVENTOR'S NAME			
Washington, D.C. 20231.					Inlies on Division			
DO NOT SEND FEES OR COM Assistant Commissioner for Pa	MPLETED FORMS TO THIS ADDRI	ESS. SEND TO: B	lox Issue Fee	Street Address	10N = 100=			
1. CORRESPONDENCE ADDRESS				City, State and ZIP Code	JAN 5 1998			
j 1		22M2/1		CO-INVENTOR'S NAME	OA			
FLEHR HO SUITE 34	HBACH TEST ALBRI	TTON AND	HERBER	Street Address	1.06			
	BARCADERO CENTER		,	City, State and ZIP Code				
	SICO CA 94111			Ony, Onto the Zir Code				
		- I -	_	☐ Check if additional of	hanges are analosad			
		1		Check ii additional t	nanges are enclosed			
APPLICATION NO.	FILING DATE	TOTAL CLAIMS		EXAMINER AND GROUP	ART UNIT	DATE MAILED		
08/542,5	i64 10/13/ 9 5	021	GREGOR	Y. B	2202	10/30/97		
C-Albanad						107.307.37		
First Named MINOR,		HALSE	Y. M.					
TITLE OF APPARATUS	AND METHOD FOR F	DACCINC D	DIVATE	Extraction of A to Let at	T & 11*** C** C** C & C **** C** C** C** C** C			
	YPERLINK DESTINA		KIAHIE	DEMOGRAPHIC	INFURMATIO	V		
T-L: 44C-L!4 1	THE THE PLOT INF	LICHA						
·								
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE		
	CLASS-SUBCLASS	BATCHINO.	AFFUN. ITFE		\$ 1380.00	DATE DOE		
2 A-62536	/WSG 380-049.0	000 T69	UTIL	ITY YES	\$660.00	01/30/98		
2 Correspondence address shar	nge (Complete only if there is a change	<u>, </u>	4 For printing	on the patent front		<u></u> _		
3. Correspondence address char	ige (Complete Only if there is a change	' ·	page, list t	he names of not more than	1FLEHR_HOHB			
	-			patent attorneys or agents ALBRITTON & HERBERT tively, the name of a firm				
	•		having as	a member a registered	₂ William S.	<u>Galliani</u>		
01/26/1998 UWALKER 0000	0243 08542564			agent. If no name is listed, vill be printed.		·		
01 FC:142	1320:00 OP				₃ Clare T. H	artnett		
5. ASSIGNMENT DATA TO BE PRINT	39.00 0P				<u> </u>			
(1) NAME OF ASSIGNEE:								
C/NET, Inc. (2) ADDRESS: (CITY & STATE OR (MINTRY)			6a. The following fees are enclose ☑ Issue Fee ☑ Adva	ed: unce Order - # of Copies	13		
San Francisco	California			6b. The following fees should be o	charged to:			
				DEPOSIT ACCOUNT NUMBER (ENCLOSE A COPY OF THIS		order no. A-62536/WSG)		
A. This application is NOT assigned	•				ance Order - # of Copies	A-02330/WSG)		
28 Assignment previously submitted				Any Deficiencies in Enclose				
	nder separate cover. Assignments should be	•		The COMMISSIONER OF PATEI requested to apply the Issue Fee				
directed to Box ASSRIMMENTS. PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the				(Authorized Signature) William S. Galliani (Date)				
				NOTE; The Issue Fee will not be accepted from anyone other than the				
an assignment.				applicant; a registered attorney or	agent; or the assignee or of	ther party		
		Certificate	of Mailing	in Interest as shown by the record	is of the Patent and Tradem	ark Office.		
	g is used, it can only be used to tran an assignment or formal drawing, m	nsmit the Issue Fee	e. This certific		other accompanying	papers.		
• • •	condence is being deposited with the			•	t class mail in			
an envelope addressed to:	Box ISSUE FEE		Jun 5011100 11	· · · · · · · · · · · · · · · · · · ·		•		
	Assistant Commissioner for Pati Washington, D.C. 20231	ents.	. i					
-m. D. 1 00	1007	(Data)	•	, .				
on: <u>December 30</u> ,		(Date)		ta		÷		
Bobbie Jutras	; 75. O	(Name of perso	making dep	oosit)				
	1007	(Signature)				; .		

1. TRANSMIT THIS FORM WITH FEE

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence

including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or the reafter. See reverse for Certificate of Mailing, below.

Under the Faperwork Reduction Act of 1995, no persons are required to respond to a collection of in <i>Burden Hour Statement:</i> This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231				2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) INVENTOR'S NAME RECEIVED		
1. CORRESPONDENCE ADDRESS			-	City, State and ZIP Code	JAN 5	1998
SUITE 3400	CH TEST ALBE ADERO CENTER O CA 94111		1030 HERBERT	CO-INVENTOR'S NAME Street Address City, State and ZIP Code Check If additional ch	nanges are enclosed	
APPLICATION NO.	FILING DATE	TOTAL CLAIMS		EXAMINER AND GROUP	ART UNIT	DATE MAILED
08/542,564	10/13/95	021	GREGORY,	В	2202	10/30/97
First Named MINOR,	HALSEY M.					·

INVENTION APPARATUS AND METHOD FOR PASSING PRIVATE DEMOGRAPHIC INFORMATION BETWEEN HYPERLINK DESTINATIONS

CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE			
SG 380-049.	000 Te	9 UTILI	TY YES	\$ 13 <i>8</i> 0.00 \$660.00	01/30/98			
3. Correspondence address change (Complete only if there is a change)				4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1. FLEHR HOHBACH TEST ALBRITTON & HERBERT LI 2. William S. Galliani 3. Clare T. Hartnett				
ON THE PATENT (print or type)								
		6a.	The following fees are endo	sed:				
C/NET, Inc. (2) ADDRESS: (CITY & STATE OR COUNTRY) San Francisco, California This application is NOT assigned. XX Assignment previously submitted to the Patent and Trademark Office.				Issue Fee				
				(ENCLOSE A COPY OF THIS FORM) ☐ Issue Fee ☐ Advance Order - # of Copies ☐ Any Deficiencies in Enclosed Fees				
☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.				The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.				
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.				(Authorized Signature) W1111 am S. Galliani (Date) NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Interest as shown by the records of the Patent and Trademark Office.				
	Complete only if there is a chan ON THE PATENT (print or type) ITRY) California e Patent and Trademark Office. separate cover. Assignments should be is identified in Block 5, no assignee propriate when an assignment has be	Complete only if there is a change) ON THE PATENT (print or type) ITRY) California e Patent and Trademark Office. separate cover. Assignments should be e is identified in Block 5, no assignee data will appear on the propriate when an assignment has been previously submitted.	Complete only if there is a change) 4. For printing or page, list the 3 registered por OR, alternating having as a mattorney or agent no name will 5. TRY) California 6. Patent and Trademark Office. 6. Separate cover. Assignments should be a is identified in Block 5, no assignee data will appear on the patent. For printing or page, list the 3 registered por Assignment has been previously submitted to the parate cover. Completion of this form is NOT a substitute for filing	Complete only if there is a change) 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agent: OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed no name will be printed. DN THE PATENT (print or type) 6a. The following fees are enclowed by the lower of the printed. 6b. The following fees are enclowed by the lower of the patent of the completion of this form is NOT a substitute for filling is the patent front page. Its the names of not more than 3 registered patent attorneys or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed no name will be printed. 6a. The following fees are enclowed by the lower of the patent. Propriate when an assignment has been previously submitted to the patent. Propriate when an assignment has been previously submitted to the parate cover. Completion of this form is NOT a substitute for filling is the names of not more than 3 registered patent attorneys or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed attorney or agent. If no name is listed.	Complete only if there is a change) 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 3. Clare T. Sa. The following fees are enclosed: □ Issue Fee □ Advance Order - # of Copie Separate cover. Assignments should be easi identified in Block 5, no assignee data will appear on the patent. propriate when an assignment has been previously submitted to the parate cover. Completion of this form is NOT a substitute for filing 4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm ALBRITT(2. William 2. Sa. The following fees are enclosed: □ Issue Fee □ R Advance Order - # of Copie Separate cover. Assignments should be charged to: □ DEPOSIT ACCOUNT NUMBER □ 06−1300 □ (ENCLOSE A COPY OF THIS FORM) □ Issue Fee □ Advance Order - # of Copie Separate cover. Assignments should be requested to the page of the			

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficent postage as first class mail in

an envelope addressed to:

Box ISSUE FEE

Assistant Commissioner for Patents

Washington, D.C. 20231

on:	December 30, 1997	(Date)
	Bobbie Jutras	(Name of person making deposit)
	Below Tutras	(Signature)
	December 30, 1997	(Date)